U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28. 2009

ergency Management Agency
od Insurance Program
Important: Read the instructions on pages 1-8.

Natior	nal Flood Insurance Pro	gram	important.	rtcad ine in	Stauctions on pa	300 . 0.	
ķ,			SECT	ION A - PRO	PERTY INFORMA	ATION	For Insurance Company Use:
A1.	Building Owner's Name	PAT TARVER					Policy Number
	Building Street Address 4 CASPIAN STREET	s (including Apt.,	Unit, Suite, and/or Bl	dg. No.) or P.C). Route and Box No).	Company NAIC Number
	City Bay St Louis Sta	te Ms ZIP Code3	9520				
A3. LOT	Property Description (L 30 & 31 BLOCK 118 S	ot and Block Nun HORELINE PAR	mbers, Tax Parcel Nu K UNIT 7 ADDITION	ımber, Legal D 1	escription, etc.)		
A5. A6.	For a building with a can be square footage of b) No. of permanent	. N.30.20827 Lor graphs of the buil per5 crawl space or en f crawl space or e flood openings in s within 1.0 foot a flood openings in	ng. W.89.39357 Horiz ding if the Certificate aclosure(s), provide enclosure(s) in the crawl space or bove adjacent grade A8.b	zontal Datum: [is being used NA sq ft NA sq in	A9. For a buar a) Squ b) No. walls wi	uilding with an attac are footage of attac of permanent flood thin 1.0 foot above al net area of flood	ched garage, provide: ched garage <u>NA</u> sq ft openings in the attached garage adjacent grade openings in A9.b <u>NA</u> sq in
		SECT	ION B - FLOOD IN	NSURANCE	RATE MAP (FIRM	I) INFORMATION	Notes and the state of the stat
	NFIP Community Name / St Louis 285251	& Community No		B2. County Nar Hancock	me		B3. State MS
	. Map/Panel Number	B5. Suffix	B6. FIRM Index	The second secon	FIRM Panel	B8. Flood	B9. Base Flood Elevation(s) (Zone
	282540145	С	Date 11/16/83	The state of the s	e/Revised Date 9/18/87	Zone(s) A8	AO, use base flood depth) 9 FT
B12.	Indicate elevation daturn Is the building located in Designation Daten/a	n a Coastal Barri	er Resources System	n (CBRS) area	or Otherwise Protect OPA NFORMATION (S	URVEY REQUIR	□Yes ⊠No
C2. E	Building elevations are bear new Elevation Certifications — Zones A1-A pelow according to the bear the bear the bear according to the bear	cate will be requin A30, AE, AH, A (woulding diagram s al Vertical Datum	vith BFE), VE, V1-V3 specified in Item A7.	of the building	☐ Building Under g is complete.), AR, AR/A, AR/AE,		
					C	Check the measure	ment used.
b d d e	d) Attached garage (to e) Lowest elevation of (Describe type of ec	ner floor st horizontal struc op of slab) machinery or eq quipment in Comi nished) grade (LA	uipment servicing the ments)	nes only)	19.0	et	to Rico only)
BHITCH'S		SECTIO	N D - SURVEYOR	R, ENGINEER	R, OR ARCHITEC	T CERTIFICATION	ON
infor I und	certification is to be sig rmation. I certify that the derstand that any false s Check here if comments	ned and sealed be information on to statement may be	oy a land surveyor, er this Certificate repres e punishable by fine o	ngineer, or arch	nitect authorized by offorts to interpret the offorts to interpret the offort the transfer of	law to certify elevat e data available. de, Section 1001.	
Cert	tifier's Name Donald E R	Ried	7		License Number 3	037	Never 2
Title	Surveyor		Company Nam	e Ried & Asso	ciates		PS-3037 . S
Add	ress 608 Sunset Dr	1	City Bay St Lo	uis	State MS	ZIP Code 39520	

Telephone 228-205-4007

Date 06/11/08

IMPORTANT: In these spaces, o	opy the corresponding infor	rmation from Secti	ion A.	For Insurance Company Use:
Building Street Address (including Apt.,	, Unit, Suite, and/or Bldg. No.) or F	P.O. Route and Box N	0.	Policy Number
4024 CASPIAN STREET City Bay St Louis StateMsZIP Code 39	9520			Company NAIC Number
SECTION	D - SURVEYOR, ENGINEER,	OR ARCHITECT	CERTIFICATION (CO	NTINUED)
Copy both sides of this Elevation Certif	icate for (1) community official, (2)) insurance agenized	ipany, and (5) building ov	WICE.
Comments SET BENCH MARK NAIL I		enaction of the first one of the second		
LOWEST MACHINERY AIR CONDITION	DER PAD AT ELEVATION 18.71 F	FEET		
Ω	10	1447 - 1777		20
Signature Duel SIL	P	Date 06/11/0	08	☐ Check here if attachments
SECTION E - BUILDING ELEV	VATION INFORMATION (SUF	RVEY NOT REQUIF	RED) FOR ZONE AO	AND ZONE A (WITHOUT BFE)
b) Top of bottom floor (including E2. For Building Diagrams 6-8 with p (elevation C2.b in the diagrams) E3. Attached garage (top of slab) is E4. Top of platform of machinery and E5. Zone AO only: If no flood depth	the following and check the approacent grade (LAG). basement, crawl space, or enclose basement, crawl space, or enclose bermanent flood openings provided of the building is feet metador equipment servicing the building	ure) isure) isure) isure) isure) isutens 8 left left meters [lefters lefters l	whether the elevation is feet meters and/or 9 (see page 8 of below the Bound of Bou	above or below the highest adjacent above or below the HAG. above or below the LAG. Instructions), the next higher floor HAG.
	6.3 Da	State (IFICATION
The property owner or owner's authoriz	F - PROPERTY OWNER (OF			
or Zone AO must sign here. The state Property Owner's or Owner's Authorize Address		City	State	ZIP Code
Addioss		201	Teleph	ONG THE RESERVE TH
Signature		Date	relepii	one -
Comments	atoture			
			The state of the s	☐ Check here if attachments
		INITY INITODISATIO	ON (OPTIONAL)	Check here if attachments
The local official who is authorized by la	SECTION G - COMMU	ONITY INFURMATION	management ordinance	can complete Sections A. B. C (or E),
and G of this Elevation Certificate. Com	plete the applicable item(s) and si	ign below. Check the	measurement used in the	enis Go. and Go.
G1. The information in Section C visauthorized by law to certify	was taken from other documentation elevation information. (Indicate the	on that has been sign ne source and date of	ed and sealed by a licent the elevation data in the	sed surveyor, engineer, or architect who Comments area below.)
G2. A community official complete	ed Section E for a building located	in Zone A (without a F	FEMA-issued or commun	ity-issued BFE) or Zone AO.
G3. The following information (Iter	ms G4G9.) is provided for commu	unity floodplain manag	gement purposes.	and the second second second
G4. Permit Number	G5. Date Permit Issued	G6.	. Date Certificate Of Con	npliance/Occupancy Issued
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (inc G9. BFE or (in Zone AO) depth of floodi	cluding basement) of the building:		ment et ☐ meters (PR) Datun et ☐ meters (PR) Datun	
Local Official's Name	The state of the s	Title		
Community Name		Telephor	ne	15 4
Signature				
O Total		Date		
Comments		Date		
Comments		Date		
Comments		Date		☐ Check here if attachments

Building Photographs See Instructions for Item A6.

			For Insurance Company Use:
Building Street Address (including	Policy Number		
4024 CASPIAN STREE	Τ		
City	State	ZIP Code	Company NAIC Number
BAY S TLOUIS MS	MS	39520	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.



FRONT VIEW 06/11/08

Continuation Page

			For Insurance Company Use:
Building Street Address (including	ng Apt., Unit, Suite, and/or Bldg. No.) or I	P.O. Route and Box No.	Policy Number
4024 CASPIAN STRE	ET		Print market estrone



REAR VIEW 06/11/08

U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency

Important: Read the instructions on pages 1-8.

lational Flood Insurance Pro	ogram		10	tractions on pa		
		SECT	ION A - PROP	ERTY INFORMA	ATION	For Insurance Company Use:
A1. Building Owner's Nam	e PAT TARVER	Altiery				Policy Number
A2. Building Street Addres 4024 CASPIAN STREET		Unit, Suite, and/or E	Bldg. No.) or P.O.	Route and Box No).	Company NAIC Number
City Bay St Louis St	ate Ms ZIP Code3	9520				Control
			Lumbar Lagal Da	parintian etc.)		
A3. Property Description (LOT 30 & 31 BLOCK 118 S	Lot and Block Nur SHORELINE PAR	K UNIT 7 ADDITIO	N 1	scription, etc.)		
A4. Building Use (e.g., Re	sidential. Non-Re	sidential, Addition, A	Accessory, etc.) F	tesidential		•
A5 Latitude/Longitude: La	t. N.30.20827 Lor	ng. W.89.39357 Ho	rizontal Datum: L		NAD 1927 🛛 N	IAD 1983
A6. Attach at least 2 photo	graphs of the bui	lding if the Certificat	e is being used to	o obtain flood insur	ance.	
A7 Building Diagram Num	ber5					ahad garage provide:
A8. For a building with a	crawl space or er	nclosure(s), provide	NA #	A9. FOR a DI	unding with all atta lare footage of atta	ched garage, provide:
a) Square footage	of crawl space or	enclosure(s)	NA sqft	b) No.	of permanent floor	d openings in the attached garage
b) No. of permaner	t flood openings i	n the crawl space of above adjacent grad	e NA	walls w	ithin 1.0 foot above	adjacent grade
c) Total net area of	flood openings in	A8.b	NA sqin	c) Tota	al net area of flood	openings in A9.b NA sq in
C) Total flot aloa of			MOUDANCE F	ATE MAD (EIDS	A) INICODMATIO	N
	SECT	TION B - FLOOD	INSURANCE	AIE MAF (FINI	ii) iidi OkiiiA iio	
B1. NFIP Community Nam	e & Community N	umber	B2. County Nan	ne ·		B3. State MS
Bay St Louis 285251			Hancock			
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index		IRM Panel	B8. Flood	B9 Base Flood Elevation(s) (Zone
		Date	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	/Revised Date 9/18/87	Zone(s) A8	AO, use base flood depth) 9 FT
282540145	С	11/16/83		19. 1 Sec. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10		
310. Indicate the source of	the Base Flood E	levation (BFE) data	or base flood de	pth entered in Item	B9.	
☐ FIS Profile	7-10-10-1	☐ Community Determined		Other (Describe)		-3
311. Indicate elevation dat	um used for BFE	in Item B9: 🛛 🗎		NAVD 1988	Other (Describ	
B12. Is the building located Designation Daten/a	in a Coastal Barr	rier Resources Syste	em (CBRS) area	or Otherwise Prote	cted Area (OPA)?	∐Yes ⊠No
	SECTIO	N C - BUILDING	ELEVATION II	FORMATION (S	SURVEY REQUI	RED)
C1. Building elevations are	based on:	☐ Construction Dr	awings*	□ Building Under	Construction*	☐ Finished Construction
*A Flourtion Carti	icata will be requi	red when constructi	on of the building	is complete.	AD/A4 A20 AD/	AH AR/AO Complete Items C2 a-a
Elevations – Zones A1	-A30, AE, AH, A (with BFE), VE, V1-\	/30, V (with BFE)	, AR, AR/A, AR/AE	:, AR/A 1-A30, AR/	AH, AR/AO. Complete Items C2.a-g
below according to the	building diagram	Specified in item A/	•			
Benchmark Utilized Lo		1 NGVD 1929				
Conversion/Comments	<u>n/a</u>				Check the measur	ement used.
				N/A 🏻 fo	et meters (Pu	erto Rico only)
a) Top of bottom floor (inc		crawl space, or end	closure floor)_		et meters (Pu	
b) Top of the next hi	gher floor	-tl	anaa ankı)		et meters (Pu	
		ctural member (V Z	ones only)		et meters (Pu	
d) Attached garage	top of slab)	inmont conjicing t	he building		et meters (Pu	
e) Lowest elevation (Describe type of	or machinery or election	quipment servicing t	ine ballaring	<u>147.</u>	.	20000 0000
				<u>9.7</u> ⊠ fe	et 🔲 meters (Pu	erto Rico only)
 f) Lowest adjacent (g) Highest adjacent 				<u>10.1</u> ⊠ fe	et 🔲 meters (Pu	erto Rico only)
3, 0 .			D ENCINEER	OP APCHITE	CT CERTIFICAT	ION
	SECTION	ON D - SURVEYO	engineer or are	itect authorized by	law to certify elev	ation
This certification is to be sinformation. I certify that	he information on	this Certificate repr	esents mv pest e	nons to interpret ti	ie uata available.	
I understand that any false	e statement may b	be punishable by fin	e or imprisonmer	t under 18 U.S. Co	de, Section 1001.	
	nts are provided o	n back of form.				NALDE
	Di- I			License Number	3037	A Dispersion P.
Certifier's Name Donald E	Ried			License Number		Lines of the lines
Title Surveyor		Company N	ame Ried & Asso			SURVEYOR AL
Address 608 Sunset Dr		City Bay St I		State MS	ZIP Code 3952	PS-200
Signature Quad (EX)	Date 02/17/08	Telephor	ne 228-205-4007		1000000
1 Tolor	7					MISSIS

		ion from Section A	For Insurance Company Use:
IMPORTANT: In these spaces,	copy the corresponding informat ., Unit, Suite, and/or Bldg. No.) or P.O. F	Route and Box No.	Policy Number
Building Street Address (including Apt 4024 CASPIAN STREET	., Offit, Suite, allufor blug. No., or P.O. I	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	NACO Number
City Bay St Louis StateMsZIP Code 3	9520	¥	Company NAIC Number
SECTION	I D - SURVEYOR, ENGINEER, OR	ARCHITECT CERTIFICA	TION (CONTINUED)
	ificate for (1) community official, (2) insu		
Comments SET BENCH MARK NAIL	IN POWER POLE AT ELEVATION 11.4	11 FEET	
BUILDING IS UNDER CONSTRUTION	N		
(1 000			
Signature Au W		Date 2/17/08	☐ Check here if attachments
SECTION E - BUILDING ELE	VATION INFORMATION (SURVE)	NOT REQUIRED) FOR Z	ZONE AO AND ZONE A (WITHOUT BFE)
and C. For Items E1-E4, use natural E1. Provide elevation information for grade (HAG) and the lowest adjance and lowest adjance	grade, if available. Check the measure in the following and check the appropriate acent grade (LAG). It basement, crawl space, or enclosure) is basement, crawl space, or enclosure) in permanent flood openings provided in Section of the building is feet meters	e boxes to show whether the constant in the co	meters ☐ above or ☐ below the HAG. meters ☐ above or ☐ below the HAG. meters ☐ above or ☐ below the LAG. e page 8 of Instructions), the next higher floor below the HAG. lAG. eters ☐ above or ☐ below the HAG. ance with the community's floodplain management
SECTIO	N F - PROPERTY OWNER (OR OV	VNER S REPRESENTATI	without a FEMA-issued or community-issued BFE)
or Zone AO must sign here. The state Property Owner's or Owner's Authoriz	ements in Sections A, B, and E are com-	ect to the best of my knowledg	
Address	1.11	City	State ZIP Code
		Date	Telephone
Signature	residences stated at the STE	Date	
Comments	a a Tyrin delen att. Gelarus a 1914 - 24		
44.24 (A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	- 5.00 h	14 3 50 4	☐ Check here if attachmen
	SECTION G - COMMUNITY	(INFORMATION (OPTIO	NAL)
and G of this Elevation Certificate. Con	aw or ordinance to administer the comm mplete the applicable item(s) and sign b	unity's floodplain management elow. Check the measurement at has been signed and seale	nt ordinance can complete Sections A, B, C (or E), nt used in Items G8. and G9.
ic authorized by law to certify	elevation information. (Indicate the so	arce and date of the elevation	data in the commonts area zero my
G2. A community official complet	ted Section E for a building located in Zo	one A (without a FEMA-issued	d or community-issued BFE) or Zone AO.
G3. The following information (Ite	ems G4G9.) is provided for community	1000plain management purpo	icate Of Compliance/Occupancy Issued
G4. Permit Number	G5. Date Permit Issued	G6. Date Centr	icate Of Compliance/Occupancy issued
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (in G9. BFE or (in Zone AO) depth of floor	ncluding basement) of the building:	stantial Improvement feet meters feet meters	s (PR) Datum s (PR) Datum
Local Official's Name		Title	
Community Name		Telephone	
Signature	-F	Date	
Comments		=	
			☐ Check here if attachme

U.S. DEPARTMENT OF HOMELAND SECURITY

OMB No. 1660-0008 Expires February 28, 2009

ELEVATION CERTIFICATE
portant: Read the instructions on pages 1-8 Fc Jeral Emergency Management Agency

Jeral Emergency Management Agency stional Flood Insurance Program	Important: Read the i	nstructions on page	s 1-8.	
moral ricod moda	SECTION A - PRO	OPERTY INFORMATI	ON	For Insurance Company Use:
 Building Owner's Name PAT TARVER 				Policy Number
2. Building Street Address (including Apt.		O. Route and Box No.		Company NAIC Number
City Bay St Louis State Ms ZIP Code	39520			8
 Property Description (Lot and Block Notes to the State of the State of	imbers, Tax Parcel Number, Legal RK UNIT 7 ADDITION 1	Description, etc.) / 3	8L-0-	33-207.000
 Building Use (e.g., Residential, Non-R. Latitude/Longitude: Lat. N.30.20827 L Attach at least 2 photographs of the building Diagram Number5 For a building with a crawl space or a Square footage of crawl space or b) No. of permanent flood openings enclosure(s) walls within 1.0 foot c) Total net area of flood openings 	ong. W.89.39357 Horizontal Datum Milding if the Certificate is being use enclosure(s), provide enclosure(s) in the crawl space or above adjacent grade NA sq ft NA sq ft NA sq ft NA sq ft	A9. For a build a) Square b) No. of walls within c) Total r	ling with an attach e footage of attach permanent flood on 1.0 foot above a net area of flood o	ned garage, provide: ned garage <u>NA</u> sq ft openings in the attached garage adjacent grade penings in A9.b <u>NA</u> sq in
SEC	TION B - FLOOD INSURANCE	RATE MAP (FIRM)	INFORMATION	
NFIP Community Name & Community ay St Louis 285251	Number B2. County N +85+4+ Hancock	lame		B3. State MS
B4. Map/Panel Number B5. Suffix 282540145 C	B6 FIRM Index / B7	7. FIRM Panel ive/Revised Date 9/18/87	B8. Flood Zone(s) A8	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 9 FT
☐ FIS Profile ☐ FIRM I. Indicate elevation datum used for BFE I. Is the building located in a Coastal Ba Designation Daten/a	rrier Resources System (CBRS) ard	ea or Otherwise Protecte		□Yes ⊠No
SECTION	ON C - BUILDING ELEVATION			ED)
Building elevations are based on: *A new Elevation Certificate will be required. Elevations – Zones A1-A30, AE, AH, A below according to the building diagram Benchmark Utilized Local Vertical Data Conversion/Comments n/a	(with BFE), VE, V1-V30, V (with Binds) specified in Item A7.	-E), AR, ANA, ANAL, A		*
Top of bottom floor (including basemer b) Top of the next higher floor c) Bottom of the lowest horizontal str d) Attached garage (top of slab) e) Lowest elevation of machinery or (Describe type of equipment in Co f) Lowest adjacent (finished) grade g) Highest adjacent (finished) grade	uctural member (V Zones only) equipment servicing the building mments) LAG)	NA. ⋈ feet 9.7 ⋈ feet	meters (Puer meter	to Rico only)
• •		ER OR ARCHITECT	CERTIFICATION	ON
SECT This certification is to be signed and seale information. I certify that the information of understand that any false statement may Check here if comments are provided	be punishable by fine or imprisonn	architect authorized by la	iw to certify elevat data available.	ALD E. PORCES
Certifier's Name Donald E Ried		License Number 30	37	
Fitle Surveyor	Company Name Ried & A	ssociates		SURVEYOR SURVEYOR PS-3087
Address 608 Sunset Dr	City Bay St Louis	State MS	ZIP Code 39520	70.000

Telephone 228-205-4007

Date 01/21/08

	the serven and ing information	from Section A.	For Insurance Company Use:
MPORTANT: In these spaces, co	py the corresponding information Jnit, Suite, and/or Bidg. No.) or P.O. Rout	te and Box No.	Policy Number
uilding Street Address (including Apt., t 024 CASPIAN STREET	Jill, Suite, and/or blug. No./ or 1.5. Nou		Company NAIC Number
ity Bay St Louis StateMsZIP Code 395	20	•	Company NAIC Number
SECTION D) - SURVEYOR, ENGINEER, OR AF	CHITECT CERTIFICAT	TION (CONTINUED)
OLO HOTE	ate for (1) community official, (2) insurance	ce agent/company, and (3)	building owner.
copy both sides of this Elevation Certific	POWER POLE AT ELEVATION 11.41 F	EET	
Comments SET BENCH MARK NAIL IN	POWER FOLE AT LLEVILLON		
1 2			
signature Man 101 977		Date 01/21/08	☐ Check here if attachments
General UI	TION INCODMATION (STRVEY N	OT REQUIRED) FOR Z	ONE AO AND ZONE A (WITHOUT BFE)
SECTION E - BUILDING ELEV	ATION INFORMATION (SURVE) N	OTTEL CONTENT	L. Continue A. P.
and C. For Items E1-E4, use natural gr E1. Provide elevation information for the grade (HAG) and the lowest adjact a) Top of bottom floor (including by the bottom floor (including by the bottom).	the following and check the appropriate be ent grade (LAG). asement, crawl space, or enclosure) is _ asement, crawl space, or enclosure) is _	oxes to show whether the e	meters above or below the HAG. meters above or below the LAG. page 8 of Instructions), the next higher floor
(elevation C2.b in the diagrams)	ermanent flood openings provided in Sect of the building is feet	meters above or L	below the HAG.
E3. Attached garage (top of slab) is _	Lieer Limeters Li	□ feet □ m	eters above or below the HAG.
E4. Top of platform of machinery and	or equipment servicing the building is number is available, is the top of the botto Unknown. The local official must certi	m floor elevated in accorda	ance with the community's floodplain management
SECTION	F - PROPERTY OWNER (OR OWN	ER'S REPRESENTATIV	VE) CERTIFICATION without a FEMA-issued or community-issued BFE) ge.
Property Owner's or Owner's Authorize		ity	State ZIP Code
Address	D	pate	Telephone
Signature			
Comments	* * :		
			Check here if attachmen
	SECTION G - COMMUNITY I	NFORMATION (OPTIO	NAL)
he local official who is authorized by lav	w or ordinance to administer the commun	nity's floodplain manageme	nt ordinance can complete Sections A, B, G (or 2), ent used in Items G8. and G9.
1. The information in Section C v	vas taken from other documentation that	has been signed and seal	data in the Comments area below.)
A community official complete	d Section E for a building located in Zone	A (MITHOUT & LEINIA-1930EC	a of community
3. The following information (Iten	ns G4G9.) is provided for community flo	ouplain management park	ficate Of Compliance/Occupancy Issued
G4. Permit Number	G5. Date Permit Issued	G6. Date Certif	ricate Of Compliance/Occupants, 1992
67. This permit has been issued for:	☐ New Construction ☐ Subst	antial Improvement	(DD) Deturn
38. Elevation of as-built lowest floor (inc	cluding basement) of the building:	feet	S (PK) Datum
69. BFE or (in Zone AO) depth of floodi	ng at the building site:	feet _ meter	s (PR) Datum
Local Official's Name		Title	
Community Name		Telephone	
Signature		Date	
Comments		-	
Comments			
	(9		Check here if attachme

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OMB No. 1660-0008 **ELEVATION CERTIFICATE** Expires February 28, 2009

Federal Emergency Management Agency

Important: Read the instructions on pages 1-8. National Flood Insurance Program SECTION A - PROPERTY INFORMATION For Insurance Company Use: Policy Number A1. Building Owner's Name PAT TARVER Company NAIC Number A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. **4024 CASPIAN STREET** City Bay St Louis State Ms ZIP Code39520 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 30 & 31 BLOCK 118 SHORELINE PARK UNIT 7 ADDITION 1 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential NAD 1927 X NAD 1983 A5. Latitude/Longitude: Lat. N.30.20827 Long. W.89.39357 Horizontal Datum: A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number5 For a building with a crawl space or enclosure(s), provide A9. For a building with an attached garage, provide: a) Square footage of attached garage a) Square footage of crawl space or enclosure(s) sq ft NA sqft b) No. of permanent flood openings in the crawl space or b) No. of permanent flood openings in the attached garage enclosure(s) walls within 1.0 foot above adjacent grade NA walls within 1.0 foot above adjacent grade c) Total net area of flood openings in A9.b NA c) Total net area of flood openings in A8.b sq in NA sq in SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3. State B1. NFIP Community Name & Community Number **B2.** County Name MS Hancock Bay St Louis 285251 B9. Base Flood Elevation(s) (Zone B4. Map/Panel Number B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood Date Effective/Revised Date Zone(s) AO, use base flood depth) 282540145 C 11/16/83 9/18/87 **A8** 9 FT B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. ☐ FIS Profile Community Determined Other (Describe) B11. Indicate elevation datum used for BFE in Item B9: ☑ NGVD 1929 ■ NAVD 1988 Other (Describe) Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? □Yes **⊠No** ☐ CBRS □ OPA Designation Daten/a SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: □ Construction Drawings* ☐ Building Under Construction* ☐ Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-g below according to the building diagram specified in Item A7. Benchmark Utilized Local Vertical Datum NGVD 1929 Conversion/Comments n/a Check the measurement used. Top of bottom floor (including basement, crawl space, or enclosure floor) 13.0 ☐ feet ☐ meters (Puerto Rico only) Top of the next higher floor NA. Bottom of the lowest horizontal structural member (V Zones only) ☐ feet ☐ meters (Puerto Rico only) NA. C) Attached garage (top of slab) NA. d) Lowest elevation of machinery or equipment servicing the building NA. (Describe type of equipment in Comments) f) Lowest adjacent (finished) grade (LAG) 9.7 Highest adjacent (finished) grade (HAG) 10.1 SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation Check here if comments are provided on back of form. License Number 3037

information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Certifier's Name Donald E Ried

Company Name Ried & Associates Title Surveyor

Address 608 Sunset Dr City Bay St Louis State MS **ZIP Code 39520**

> Date 01/21/08 Telephone 228-205-4007

Signature



IMPORTANT: In these spa	aces, copy the corresponding info	rmation from Section A.	For Insurance Company Use	7, 7, 8148
Building Street Address (includ	ing Apt., Unit, Suite, and/or Bldg. No.) or		Policy Number	Many as
4024 CASPIAN STREET City Bay St Louis StateMsZIP	Code 39520		Company NAIC Number	
6E/	CTION D - SURVEYOR, ENGINEER	OR ARCHITECT CERTIFICAT	ION (CONTINUED)	
NEED AND THE PROPERTY AND A STATE OF THE PROPERTY OF THE PROPE				
	on Certificate for (1) community official, (2		building owner.	-
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(1)	- 20	s en de participa en anticologo de la compansión de la compansión de la compansión de la compansión de la comp	Saturday of the Book of the Albertaile	17 5 A
Signature Stable 2		Date 01/21/08	☐ Check here if attac	hments
SECTION E - BUILDING	ELEVATION INFORMATION (SU	RVEY NOT REQUIRED) FOR Z	ONE AO AND ZONE A (WITHOUT BE	THE RESERVE OF THE PERSON NAMED IN
and C. For Items E1-E4, use n E1. Provide elevation informa grade (HAG) and the low a) Top of bottom floor (ind b) Top of bottom floor (ind E2. For Building Diagrams 6- (elevation C2.b in the dia E3. Attached garage (top of s E4. Top of platform of machin E5. Zone AO only: If no floor	natural grade, if available. Check the mention for the following and check the apprect adjacent grade (LAG). Cluding basement, crawl space, or enclose cluding basement, crawl space, or enclose with permanent flood openings provide grams) of the building is	asurement used. In Puerto Rico only opriate boxes to show whether the element is feet feet din Section A Items 8 and/or 9 (see feet meters above or sters above or below the HA ing is feet meters the bottom floor elevated in accordance.	evation is above or below the highest adjacemeters above or below the HAG. meters above or below the LAG. page 8 of Instructions), the next higher floot below the HAG. G. ers above or below the HAG. ice with the community's floodplain management.	cent
CE/	CTION F - PROPERTY OWNER (O	OWNED'S DEDDESENTATIV	E) CERTIFICATION	интерретиватия в м
			thout a FEMA-issued or community-issued	REE)
Property Owner's or Owner's A	ne statements in Sections A, B, and E are uthorized Representative's Name	in open til mersky, service	The said of the state of the said of the said.	
Address	The second secon	City	State ZIP Code	make or
Signature	The state of the s	Date	Telephone	
Comments	e go area s	1 1 4 2 M K 43 0K 35040 42.	Partie to the second of the second	
913349. (Cont., on the cont.)		"A call a last	☐ Check here if atta	ohmonto
arters consideration and the first term in the construction of the state of the sta	SECTION G - COMMU	NITY INFORMATION (OPTION)	COMPANIES OF THE PROPERTY OF T	CHITIETIE
ne local official who is authorize	d by law or ordinance to administer the c	community's floodplain management	ordinance can complete Sections A, B, C (or E),
	e. Complete the applicable item(s) and s			
is authorized by law to	certify elevation information. (Indicate th	e source and date of the elevation d		Ct wno
	mpleted Section E for a building located on (Items G4G9.) is provided for committee to the committee of th			
G4. Permit Number	G5. Date Permit Issued		te Of Compliance/Occupancy Issued	- A'-
G4. Fellink Number	G5. Date remit issued	Oo. Date Octimos	1 m	7
7. This permit has been issued	for: New Construction	Substantial Improvement		
	por (including basement) of the building:	feet		
9. BFE or (in Zone AO) depth of	f flooding at the building site:	feet meters (F	PR) Datum	
Local Official's Name		Title		
Community Name		Telephone		17
Signature		Date		1.7
Comments				
				10.00
			☐ Check here if atta	chments

J.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFO	RMATION	For Insurance Company Use:
A1. Building Owner's Name Patricia A. Tarver	Policy Number	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Boulder Caspian Street	ox No.	Company NAIC Number
City Waveland State MS ZIP Code 39576	<u> </u>	114704 - 2017 - 2017
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOts 30 and 31 Square 118 Shorleline Park S/D Unit 7 Addition 1 Hancock County, MS Book	706 Page 530	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential		
A5. Latitude/Longitude: Lat. 30 18 29.44 Long. 89 23 36.30 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood i	Horizontal Datu	ım: ☐ NAD 1927 ☒ NAD 1983
A7. Building Diagram Number 5	nsurance.	
A8. For a building with a crawl space or enclosure(s), provide a) Square footage of crawl space or enclosure(s) N/A sq ft a)	a building with an attache	
b) No. of permanent flood openings in the crawl space or	Square footage of attache No. of permanent flood or	ed garage <u>N/A</u> sq ft openings in the attached garage
ericlostre(s) wais within 1.0 foot above adjacent grade N/A	walls within 1.0 foot above	e adjacent grade N/A
	Total net area of flood ope	enings in A9.b N/A sq in
SECTION B - FLOOD INSURANCE RATE MAP (F	IRM) INFORMATION	
B1. NFIP Community Name & Community Number City of Waveland Mississippi 285254 B2. County Name Hancock	B3 MS	S. State
B4. Map/Panel Number B5. Suffix B6. FIRM Index B7. FIRM Panel Date Effective/Revised Date	B8. Flood	B9 Base Flood Elevation(s) (Zone
282254 0145 C 8/18/92 11/18/87	Zone(s) A 8	AO, use base flood depth)
310. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in the	em B9.	
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Descr	· ———	¥1
 311. Indicate elevation datum used for BFE in Item B9:	Other (Describe)	
Designation Date CBRS OPA	otected Area (OPA)?	☐Yes ⊠No
OFOTION O. DUNING		
SECTION C - BUILDING ELEVATION INFORMATION	(SURVEY REQUIRED	
Construction Drawings* ☐ Building Und *A new Elevation Certificate will be required when construction of the building is complete.	der Construction*	☐ Finished Construction
22. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFF), AR, AR/A, AR/A	AE, AR/A1-A30, AR/AH, A	R/AO. Complete Items C2 a-q
below according to the building diagram specified in item A7.		y and a support name of a g
Benchmark Utilized A215 Vertical Datum NGVD 29 Conversion/Comments N/A		
- In the second	Check the measuremen	t used.
a) Top of bottom floor (including basement, crawl space, or enclosure floor) 25.0.	feet meters (Puerto R	ico only)
b) Top of the next higher floor N/A.	feet meters (Puerto R	
	feet meters (Puerto R	
100	feet ☐ meters (Puerto R feet ☐ meters (Puerto R	
(Describe type of equipment in Comments)	ieet Infeters (Puerto R	ico oniy)
	feet	
g) Highest adjacent (finished) grade (HAG) 10.1.	feet meters (Puerto Ri	ico only)
SECTION D - SURVEYOR, ENGINEER, OR ARCHITE	CT CERTIFICATION	
This certification is to be signed and sealed by a land surveyor engineer or architect authorized to	y law to cortify aloustion	
information. I certify that the information on this Certificate represents my best efforts to interpret I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. C	the data available. Code, Section 1001.	
☐ Check here if comments are provided on back of form.		WILLIAM PROMISE
Certifier's Name Stuart Williamson License Number	13199	Engineer 9
Title Company Name		Engineer 3
Address 7045 Rolling Green Drive City Pass Christian State MS ZIP	Code 39571	Office military
Signature Date 3/27/07 Telephone 228 493-9988		OF MISSISSIP
U		

77.				
IMPORTANT: In these space	es, copy the corresponding informati	on from Section A.		or Insurance Company Use:
Building Street Address (including 4024 Caspian	Apt., Unit, Suite, and/or Bldg. No.) or P.O. R	oute and Box No.		olicy Number
City Waveland State MS ZIP Co	ode 39576		C	ompany NAIC Number
SECT	ION D - SURVEYOR, ENGINEER, OR	ARCHITECT CERTIFICA	TION (CONTIN	IUED)
Copy both sides of this Elevation (Certificate for (1) community official, (2) insur	ance agent/company, and (3) building owner.	
Comments				
Signature A DA		Date 3/27/07		☐ Check here if attachments
ACCTION E PUIL DING E	ELEVATION INFORMATION (SURVEY	NOT REQUIRED) FOR 7	ONE AO AND	
For Zones AO and A (without BFE and C. For Items E1-E4, use nature E1. Provide elevation information grade (HAG) and the lowest a) Top of bottom floor (inclure b) Top of bottom floor (inclure b) Top of bottom floor (inclure E2. For Building Diagrams 6-8 w (elevation C2.b in the diagrams E3. Attached garage (top of slabe E4. Top of platform of machiner E5. Zone AO only: If no flood doordinance?	E), complete Items E1-E5. If the Certificate is ural grade, if available. Check the measuren in for the following and check the appropriate adjacent grade (LAG). ding basement, crawl space, or enclosure) is ding basement, crawl space, or enclosure) is with permanent flood openings provided in Seams) of the building is feet meters by and/or equipment servicing the building is epth number is available, is the top of the bolion Unknown. The local official must certificate the properties of the pro	s intended to support a LOM/nent used. In Puerto Rico on a boxes to show whether the description of the section A Items 8 and/or 9 (see the lead of th	A or LOMR-F requity, enter meters. elevation is above meters above a page 8 of Instrubelow the HAGAG. eters above ance with the control G. VE) CERTIFICA without a FEMA-i	uest, complete Sections A, B, e or below the highest adjacent we or below the HAG. we or below the LAG. uctions), the next higher floor G. or below the HAG. nmunity's floodplain management
Address		City	State	ZIP Code
		Date	Telephone	
Signature			07 (1770) 20 M (1770) 20 M (1770)	
Comments				
				Check here if attachmer
	SECTION G - COMMUNITY	INFORMATION (OPTIO	NAL)	
he local official who is authorized	by law or ordinance to administer the commu Complete the applicable item(s) and sign be	unity's floodplain managemer	nt ordinance can	complete Sections A, B, C (or E), 38. and G9.
The information in Section is authorized by law to ce	n C was taken from other documentation that ertify elevation information. (Indicate the sou	at has been signed and seale rce and date of the elevation	d by a licensed s data in the Comi	urveyor, engineer, or architect who ments area below.)
	pleted Section E for a building located in Zor			sued BFE) or Zone AO.
33. The following information	(Items G4G9.) is provided for community f			
G4. Permit Number	G5. Date Permit Issued	G6. Date Certifi	icate Of Complian	nce/Occupancy Issued
67. This permit has been issued fo	r: New Construction Subs	stantial Improvement		and the second s
The state of the s	r (including basement) of the building:	feet		
69. BFE or (in Zone AO) depth of f		feet meters	(PR) Datum	
Local Official's Name		Title		
Community Name		Telephone		
Signature		Date		
Comments		- Augustine - Augu		T.
				☐ Check here if attachme